

Pro Se 15 (Rev. 12/16) Complaint for Violation of Civil Rights (Non-Prisoner)

**FILED****UNITED STATES DISTRICT COURT**for the  
Western District of TX  
Austin Division**MAR 01 2023****CLERK, U.S. DISTRICT CLERK  
WESTERN DISTRICT OF TEXAS  
BY ck DEPUTY****1:23 CV 00233 RP**SHERMAN Wilson

Plaintiff(s)

(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names.)

-v-

Austin Police Dept

Defendant(s)

(Write the full name of each defendant who is being sued. If the names of all the defendants cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include addresses here.)

Case No.

(to be filled in by the Clerk's Office)

Jury Trial: (check one) ☐ Yes ☒ No**COMPLAINT FOR VIOLATION OF CIVIL RIGHTS  
(Non-Prisoner Complaint)****NOTICE**

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in forma pauperis.

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**I. The Parties to This Complaint****A. The Plaintiff(s)**

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name SHERMAN WILSON  
 Address 5403 VILLAGE LN  
Austin Tx 78744  
City State Zip Code  
 County TRAVIS  
 Telephone Number 512-783-3274  
 E-Mail Address SHERWIL635@GMAIL.COM

**B. The Defendant(s)**

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

**Defendant No. 1**

Name Austin Police Dept Joseph Chacon  
 Job or Title (if known) THE POLICE  
 Address 715 E 8th  
Austin Tx 78701  
City State Zip Code  
 County TRAVIS  
 Telephone Number 512-974-5000  
 E-Mail Address (if known) \_\_\_\_\_

☐ Individual capacity ☒ Official capacity

**Defendant No. 2**

Name Chief of Police Joseph Chacon  
 Job or Title (if known) Chief  
 Address 715 E 8th  
Austin Tx 78701  
City State Zip Code  
 County TRAVIS  
 Telephone Number 512-974-5000  
 E-Mail Address (if known) \_\_\_\_\_

☐ Individual capacity ☒ Official capacity

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## Defendant No. 3

Name \_\_\_\_\_

Job or Title (if known) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

County \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-Mail Address (if known) \_\_\_\_\_

☐

Individual capacity

☐

Official capacity

## Defendant No. 4

Name \_\_\_\_\_

Job or Title (if known) \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

Zip Code \_\_\_\_\_

County \_\_\_\_\_

Telephone Number \_\_\_\_\_

E-Mail Address (if known) \_\_\_\_\_

☐

Individual capacity

☐

Official capacity

**II. Basis for Jurisdiction**

Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

A. Are you bringing suit against (check all that apply):

☐Federal officials (a *Bivens* claim)☒

State or local officials (a § 1983 claim)

B. Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?

EXCESSIVE FORCE  
Shot ME with Shotgun Loaded w/ Bean BAGS  
after being in compliance with their orders  
at Point Blank Range

C. Plaintiffs suing under *Bivens* may only recover for the violation of certain constitutional rights. If you are suing under *Bivens*, what constitutional right(s) do you claim is/are being violated by federal officials?

- D. Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under *Bivens*, explain how each defendant acted under color of federal law. Attach additional pages if needed.

### III. Statement of Claim

State as briefly as possible the facts of your case. Describe how each defendant was personally involved in the alleged wrongful action, along with the dates and locations of all relevant events. You may wish to include further details such as the names of other persons involved in the events giving rise to your claims. Do not cite any cases or statutes. If more than one claim is asserted, number each claim and write a short and plain statement of each claim in a separate paragraph. Attach additional pages if needed.

- A. Where did the events giving rise to your claim(s) occur?

5400 Village Lane  
Austin TX 78744

- B. What date and approximate time did the events giving rise to your claim(s) occur?

June 22, 2022 approx 11 maybe 12 or  
Later or earlier. Uncertain of exact time

- C. What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?)

Selling Handbags to neighbors T shirt  
Miscellaneous items including BB Pistol  
that didn't work. Someone called 911. Police  
showed up. Order given "Drop the Weapon. Droppe  
Put arms stretched out to side. Done. Walk  
Backwards to my voice. Doing it. Get on knees  
Sir I'm Disabled Veteran with BAD knees have  
Braces on both knees. Well Turn around Slowly  
doing it when Boom. I'm Shot. see Back

All the neighbors 1<sup>st</sup> + 2<sup>nd</sup> Floor of Apt Complex Located at 5400 Village Lane. Mexican Family with Husband Wife and Daughter that Bought Expensive Handbag Michael Kors for \$2000. Which was deposited into to inmate account at Central Booking. Travis Cty. Was arrested and charged with 5 counts Terroristic Threat from June 22 to July 1<sup>st</sup> when posted Bond \$2500. Atty Jesus Gabriel Hernandez Atty for Plaintiff.

**IV. Injuries**

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

Deep Bruising, PTSD diagnosis at  
VA Olin E Teague Waco Bldg 94, & Temple  
Mental Health Clinic.

Bldg 94 Waco - Dec - Dec 23, 2022  
Bldg 202 Temple TX - Jan 10, 2023 Discharge Date 3/10/23  
All Mental Health Records immediately Available

**V. Relief**

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

Excessive Force claim 2.5 million punitive  
Damages for Pain & Suffering, Dismissal of  
False Charges placed on Me, to include  
Mental Health issues resulting from  
Shotgun Blast to abdomen and Rib



**VI. Certification and Closing**

Under Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my knowledge, information, and belief that this complaint: (1) is not being presented for an improper purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost of litigation; (2) is supported by existing law or by a nonfrivolous argument for extending, modifying, or reversing existing law; (3) the factual contentions have evidentiary support or, if specifically so identified, will likely have evidentiary support after a reasonable opportunity for further investigation or discovery; and (4) the complaint otherwise complies with the requirements of Rule 11.

**A. For Parties Without an Attorney**

I agree to provide the Clerk's Office with any changes to my address where case-related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.

Date of signing:

3/21/23

Signature of Plaintiff

Sherman Wilson

Printed Name of Plaintiff

SHERMAN WILSON

**B. For Attorneys**

Date of signing:

Signature of Attorney

Printed Name of Attorney

Bar Number

Name of Law Firm

Address

Telephone Number

512-783-3274

E-mail Address

SHERWIL635@gmail.com